## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

FITERRE, IGNACIO

**MIAMI FL 33142** 

24

1996

9. Name and Address of Current Registered Agent

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2445 NW 39TH AVE 2ND FLOOR

DOCUMENT # N 1. Corporation Name  CUBANET ORGANIZATIO	95000002154 (1) DN, INC.			
Principal Place of Business	Mailing Address	- * 1000/(10): BUE 1818: BII(U BO)(U BO)(U BO)(U BO)(U BO)(U BO)(U BO) BII(U BO)		
2445 NW 39TH AVE 2ND FLOOR MIAMI FL 33142	P O BOK 557001			
	1672 BOMI LIR. WINTER PARK-FL 32792	3. Date Incorporated or Qualified 05/01/1995	<b>3a</b> . Da	ite of Last Report
2. Principal Place of Business	2a. Mailing Address	4. FEI Number		Applied For
21	26 1672 BOMI CIR.	65-0615598		Not Applicat
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	City & State 28 WINTER PARK	Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip Count		8. This corporation has liability for in	ntangible ta	x under s. 199.032,

30

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

81 Name

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SEMINOLE

City

Florida Statutes

Street Address (P.O. Box Number is Not Acceptable)

10. Name and Address of New Registered Agent

SIGNATURE .		0.075	Registered Agent signature re	caused when prinstaked DATE
	Signature, typed or printed name of registered agent and title 4 app			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRECTO		13.	
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	RIVERA, MIGUEL C		1 2 NAME	
STREET ADDRESS	340 PAGE ST #303		1 3 STREET ADDRESS	
CITY -ST-ZIP	SAN FRANCISCO CA 94102		14 CITY-ST-ZIP	
TITLE	D	□ DELETE	2.1 TITLE T/D	☐ Change ☐ Addition
NAME	FITERRE, IGNACIO		2.2 NAME	
STREET ADDRESS	2445 NW 39TH AVE 2ND FLOOR		2 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33142		2 4 CITY - ST - ZIP	
TITLE	D	DELETE	3.1 TITLE 5/0	Change Addition
NAME	DE JUAN, SANTIAGO		3 2 NAME	1672 BOMI CIR:
STREET ADDRESS	-2201-EUGENIA CT		3 3 STREET ADDRESS	WINTER PARK FL 32192
CITY - ST - ZIP	OVIEDO FL 32765		3 4. CITY - S1 - ZIP	
TITLE	D	DELETE	4.1 TITLE P/O	OMAR GALLDED Change Addition
NAME	-VALDES; JOSE		4. 2 NAME	12518 NW 71 LANE
STREET ADDRESS	-10123 BOYTON PL-CIR -		4.3 STREET ADDRESS	MIAMI - FL 33182
CITY - ST - ZIP	BOYNTON BEACH FL 33497		44 CITY - ST - ZIP	
TITLE		DELETE	5 1 TIFLE	JOSE A. HERNANDEZ Change MAddition
NAME			5.2 NAME	4008 WILLOWRIDGE DR.
STREET ADDRESS			5 3 STREET ADDRESS	
CITY - ST - ZIP			5.4 CHY-ST-ZIP	DALLAS TX 75244
TITLE		DELETE	61 TITLE VP/D	ROSA BERRE
NAME			6.2 NAME	1 · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS			6.3 STREET ADDRESS	5530 AGCOT CT # 22

64 CITY-ST-ZIP

ALEXAN DRIA

ALEXAN DRIA

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on any attachment with an address.

SIGNATURE:

SANTIAGO DE JUAN)

4-1-96 (407)657-04W

CR2E037 (12/95)

Applied For Not Applicable

Zip Code

85

☐ Yes XNo